

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Computer Readable Form (CRF)?::	No
Title::	SOLID DOSAGE FORMS COMPRISING PULLULAN
Attorney Docket Number::	029318-0985
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	0
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	John D.
Family Name::	Pruitt
City of Residence::	Collegeville
State or Province of Residence::	PA
Country of Residence::	US

Street of mailing address:: 603 Buyers Road
City of mailing address:: Collegeville
State or Province of mailing address:: PA
Postal or Zip Code of mailing address:: 19403

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Douglas C.
Family Name:: Hovey
City of Residence:: Trooper
State or Province of Residence:: PA
Country of Residence:: US
Street of mailing address:: 19 N. Midland Avenue
City of mailing address:: Trooper
State or Province of mailing address:: PA
Postal or Zip Code of mailing address:: 19403

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Finland
Status:: Full Capacity
Given Name:: Tuula A.
Family Name:: Ryde
City of Residence:: Malvern
State or Province of Residence:: PA
Country of Residence:: US
Street of mailing address:: 54 Lloyd Avenue
City of mailing address:: Malvern

State or Province of mailing address:: PA

Postal or Zip Code of mailing address:: 19355

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.A

Status:: Full Capacity

Given Name:: H. William

Family Name:: Bosch

City of Residence:: Bryn Mawr

State or Province of Residence:: PA

Country of Residence:: US

Street of mailing address:: 237 Rodney Circle

City of mailing address:: Bryn Mawr

State or Province of mailing address:: PA

Postal or Zip Code of mailing address:: 19010

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Robert W.

Family Name:: Lee

City of Residence:: Boyertown

State or Province of Residence:: PA

Residence::

Country of Residence:: US

Street of mailing address:: 83 Valley Brook Road

City of mailing address:: Boyertown

State or Province of mailing address:: PA
Postal or Zip Code of mailing address:: 19512

Correspondence Information

Correspondence Customer Number:: 22428
E-Mail address:: PTOMailWashington@Foley.com

Representative Information

Representative Customer Number::	31049	
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming benefit under 35 USC 119(e)	60/425,264	11/12/2002

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Elan Pharma International Ltd.